PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10715105

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
(Column 1) (Column 2)							7	TYPE [OR	SMALL	ENTITY	
TOTAL CLAIMS			92					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED .		иимв	NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGEA	ABLE CLAIMS	22 minus 20=		* 2		Ì	X\$ 9=		OR	X\$18=	36	
IND	DEPENDENT CI	LAIMS	4 minus 3 =		* /	* /		X43=		OR	X86=	86	
ΜL	JLTIPLE DEPEN	NDENT CLAIM P	RESENT	ESENT				+145=		OR	+290=	-	
* If the difference in column 1 is less than zero, enter "0" in col						olumn 2	L	TOTAL		OR	TOTAL	RON	
CLAIMS AS AMENDED - PART II										j	OTHER	THAN	
(Column 1) (Column 2) (Column 3)							_	SMALL	ENTITY	OR .	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	- C: AIAA	=		X43=		OR	X86=		
	FIRST PRESE	ENTATION OF MU	JLTIPLE DEF	PENDEN	CLAIM			+145=		OR	+290=		
								TOTAL			TOTAL		
								DDIT. FEE		Ort ,	ADDIT. FEE		
		(Column 1) CLAIMS	1	(Colun		(Column 3)			100			1001	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	- C: AINA	=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
								TOTAL			TOTAL		
		A	DDIT. FEE		JON ,	ADDIT. FEE							
-		(Column 1)	,	(Colum		(Column 3)	_						
AMENDMENT C		REMAINING AFTER AMENDMENT	- 1-	NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	Γ	X\$ 9=		OR	X\$18=		
	Independent	*	Minus *** NULTIPLE DEPENDENT		01.4114	=		X43=		OR	X86=		
	FIRST PRESE	NIATION OF MU	ILTIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE										L	TOTAL		
***	If the "Highest Nur	mber Previously Pa mber Previously Pa nber Previously Paid	id For IN THIS	S SPACE is	s less than	n 3, enter "3."		DDIT. FEE L			ODIT. FEE		
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